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ELI LILLY & COMPANY PATENT DIVISION P.O. BOX 6288				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
INDIANAPOLIS	, IN 46206-6288					(Depositor's name)	
						(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	١	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/567,639	02/08/2006		Barry Peter Clark		X-15987	1317	
TITLE OF INVENTION:	PYRIDINYLMORPHC	DLINE DERIVATIVES					
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	E FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	01/09/2009	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
SHAMEEM, GOLAM M		1626	514-237200				
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> </ol>			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AN	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or ty	ype)			
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIG	NEE		(B) RESIDENCE: (CITY and STATE OR COUNTRY)				
Eli Lilly and Company Indianapolis, Indiana							
Please check the appropriate assignee category or categories (will not be printed on the patent): 🚨 Individual 👺 Corporation or other private group entity 🚨 Government							
4a. The following fee(s) are submitted:  4b. Payment of Fee(s): (Please first reapply states are submitted:  A check is enclosed.					ny previously paid issue fe	e shown above)	
				redit card. Form PTO-2038 is attached.			
The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 05-0840 (enclose an extra copy of this form							
5. Change in Entity Stat	us (from status indicate SMALL ENTITY stat		☐ b. Applicant is no lo	onger claiming SMA	LL ENTITY status. See 37 (	FR 1 27(9)(2)	
	l Publication Fee (if req	uired) will not be accept	ed from anyone other than			the assignee or other party in	
Authorized Signature	Charles E	. Colem		Date Jan	1. 5, 2009		
Typed or printed name	Charles E	. Cohen		() Registration ?	. 5, 2009 No. 34,565		
an application. Confident submitting the completed this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	iality is governed by 35 Lapplication form to the ons for reducing this building this building 22313-1450. Do 13-1450.	5 U.S.C. 122 and 37 CFF e USPTO. Time will var trden, should be sent to t O NOT SEND FEES OR	R 1.14. This collection is e y depending upon the ind he Chief Information Offi COMPLETED FORMS	r retain a benefit by estimated to take 12 lividual case. Any c cer. U.S. Patent and TO THIS ADDRES	the public which is to file (a minutes to complete, includ omments on the amount of Trademark Office, U.S. De	nd by the USPTO to process) ing gathering, preparing, and time you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450,	